MODEL EMPLOYER'S STATEMENT

Employer's particulars	Employer's name: Employer's address: Postcode and town: Chamber of Commerce number:								
Employee's	Employee's name:								
particulars	Employee's address: Postcode and town: Date of birth: Commencement of employment: Position:								
				(day a	nonth,	vear			
					nonth,				
Type of	The employee:	is	employed	for an	indefin	ite period / on a p	ermanent ba	sis	
employment		is employed for a fixed period / on a temporary basis until							
contract		is flexibly employed as							
	Is there a trial period?	(e.g. stand-in worker, on-call worker or temporary agency worker (including phase))							
	If so, has the trial period expired?	no no		yes yes					
	Has a reorganization or measure been announced that may affect the employment or income, or is there any intention to terminate the employment in the near future?		110						
			1	yes					
	If so, please explain what the impact of this is on the employee's employment or income:								
	Director / shareholder:	no	no yes, share percentage %						
Employment continuation statement (if applicable)	If the employee continues to perform as at present and business conditions remain the same, will the fixed-term contract be continued or renewed when that period expires? If the employment contract is renewed, will the employment conditions be amended, and if so, please explain how:	ye	s, for a fixe	ed peri	od for a	a term of at least _	n	nonths	
		yes, for an indefinite period							
		no, no continued or renewed employment contract							
		no							
		110		yes					
	Name of signatory:						extra sign —	ature:	
Income	1. Gross annual salary ¹	€					(basic sala	ary excluding	overtime etc.)
	-	€	€						
	 3. 13th month salary ³ 4.Christmas bonus / end-of-year bonus ³ 5. Structural Irregular hours allowance ⁴ 6. Structural Overtime allowance ⁴ 						_		
							_		
							_		
	 Structural Commission ⁴ Structural flexible budget, freely disposable and available as monetary payment ³ 	€					_		
		€					_		
	9								
	10	€					_		
	 The gross annual salary based on the usual number of wo In the case of holiday vouchers or a time savings fund, not Unconditional income components laid down in the employ Conditional income components which are usual for the typ Note the amount granted over the past 12 months. 	e 100% ment c	of the value ontract.	e of the				tinue for the futu	re.
	Have you provided the employee with a private loan?	no	no yes If so, commencen				ment date		
		pri	ncipal €			Term (months)		month	ly repayment €
	Have the employee's wages been attached or has an assignment of those wages been imposed?	no	-	yes		If so, until		_€	per month
The signatory declares on behalf of the employer that this form was completed truthfully.		Signe	ed in				on		
			Name of signatory:						
Should you wish to verify this information, please contact:			Name:						
	Telep	Telephone:							
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